

PART B - FEE(S) TRANSMITTAL

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(Signature)

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/698,025	October 30, 2003	Carlos Schuler	0150.00	7124

TITLE OF INVENTION:

INCREASED DOSAGE METERED DOSE INHALER

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$ 1,510.00	\$ 300.00	\$ 1,810.00	12/29/08
EXAMINER	ART UNIT		CLASS-SUBCLASS		

DOUGLAS, STEVEN O.

3771

128-200230

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Guy Tucker

2 Michael J. Mazza

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

NEKTAR THERAPEUTICS

San Carlos, CA

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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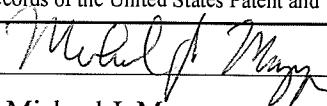
The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-0348.

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature



Date December 17, 2008

Typed or printed name Michael J. Mazza

Registration No. 30,775

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